

239665

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☐ IXC        ☒ CLEC        ☐ ILEC        ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

Global Crossing Local Services, Inc.

Company Name

PERSON

800-414-1973

Dba/fka

Telephone #

225 Kenneth Drive

Mailing Address

Rochester, NY 14623

City, State, Zip Code

Same as Above

Business Location

Monroe

City, State, Zip Code

County

## REGISTERED AGENT INFORMATION

Registered Agent: Not Applicable

Mailing Address:

City, State, Zip Code:

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Scott Seab  
**General Manager** (Include address if different than above.)  
 720-888-3942 / 720-888-5134 / Scott.Seab@Level3.com  
 Telephone Number Facsimile Number E-mail Address
- B. Karen Hyde  
**Customer Relations /Complaints Representative** (Include address if different than above.)  
 724-743-9719 / 720-888-5134 / Karen.Hyde@Level3.com  
 Telephone Number Facsimile Number E-mail Address
- C1. Scott Seab  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)  
 720-888-3942 / 720-888-5134 / Scott.Seab@Level3.com  
 Telephone Number Facsimile Number E-mail Address
- C2. 800-414-1973  
**Customer Contact (Toll Free Number)**
- D. Technician on Duty  
**Engineering Operations** (Include address if different than above.)  
 888-907-6638 / N/A / N/A  
 Telephone Number Facsimile Number E-mail Address
- E. Technician on Duty  
**Test and Repair** (Include address if different than above.)  
 888-907-6638 / N/A / N/A  
 Telephone Number Facsimile Number E-mail Address

F. Technician on Duty  
**Emergencies** (During non-office hours)  
888-907-6638 / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Scott Seab  
**Regulatory Officer** (Include address if different than above.)  
720-888-3942 / 720-888-5134 / Scott.Seab@Level3.com  
Telephone Number Facsimile Number E-mail Address

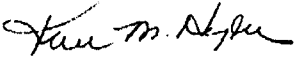
H. N/A  
**Dual Party Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

I. Andrew Labbe; Manager, Tax  
**Interim LEC Fund Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-3883 / N/A / Andrew.Labbe@level3.com  
Telephone Number Facsimile Number E-mail Address

J. Andrew Labbe; Manager, Tax  
**Universal Service Fund Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-3883 / N/A / Andrew.Labbe@level3.com  
Telephone Number Facsimile Number E-mail Address

K. Andrew Labbe; Manager, Tax  
**Gross Receipts Mailings** (Name)  
1025 Eldorado Boulevard  
Mailing Address  
720-888-3883 / N/A / Andrew.Labbe@level3.com  
Telephone Number Facsimile Number E-mail Address

L. Andrew Labbe; Manager, Tax  
**Lifeline Mailings** (Name)  
1025 Eldorado Boulevard  
Mailing Address  
720-888-3883 / N/A / Andrew.Labbe@level3.com  
Telephone Number Facsimile Number E-mail Address

Karen M. Hyde  
This form was completed by (print name)  
Regulatory Paralegal  
Title  
  
Signature  
10/3/12  
Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Clerk's Office**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC 11/2010)